Radiation Safety Branch User Registration Record

The Radiation Safety Branch will notify your of your ID number and your assigned class.

| Privacy Act Notification: Collection of this information is authorized by the Code of Pederal Regulations. Title 10. Parts 19 and 20. by the U.S. Nuclear Regulatory Commission Materials: License granted to NIH. Providing your Social Security number is voluntary, however, failure to report it may result in your not being permitted to work in areas using radiocative materials. The information is used to track your radiation exposure, use or in addicative materials. The information is used to track your radiation exposure, use or in addicative materials. The information is used to track your radiation exposure, use or in addicative materials. The information is used to track your radiation and Occupational Safety and Health Management Information Systems HHS/NIH/ORS* are listed on the reverse of this page. 2. Applicant's Eirst Name | | | |
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| 4. Social Security Number 5. If you are here four months or less, give your expected separation date: 6. Work Location: Building and Suffix Floor and Wing Ploor and Suffix Ploor and Su | New Registration Return of Former Registered User (If you are a registered user who left NIH and are returning as a user of radioactive materials, check this box.) | Regulations, Title 10, Parts 19 and 2 License granted to NIH. Providing you to report it may result in your not bein als. The information is used to track and training in radiation safety. Allow 09-25-5166, "Administration: Radiation | 20, by the U.S. Nuclear Regulatory Commission Materials our Social Security number is voluntary, however, failure and permitted to work in areas using radioactive materi-your radiation exposure, use of radioactive materials, vable third-party disclosure of Privacy Act system notice on and Occupational Safety and Health Management |
| 4. Social Security Number 5. If you are here four months or less, give your expected separation date: 6. Work Location: Building and Suffix Floor and Wing Ploor and Suffix Ploor and Su | | | |
| Building and Suffix Floor and Wing Room and Suffix Floor and Wing Floor and Wing Room and Suffix Floor and Wing Floor and W | | 5. If you are here four months or less, give you | |
| 10. Mailing Address: Building and Suffix Floor and Wing Room and Suffix 11. Institute 12. Sex M=Male F=Female | | Room and Suffix | 7. Phone Number |
| Building and Suffix Floor and Wing Room and Suffix 11. Institute 12. Sex M=Male F=Female | 8. Fax Number | 9. Authorized User's Name | RSB Number |
| Building and Suffix Floor and Wing Room and Suffix 11. Institute 12. Sex M=Male F=Female | - | | |
| O6=X-ray machines 07=PET imaging 15=RSB contractors 08=X-ray diffractor & 16=Cyclotron 16=Cyclot | Building and Suffix Floor and Wing - 13. Type of User 01=Researcher 09=Irra | 14. diator/sealed sources | M=Male F=Female Applicant's Title 15. MSC (Mail Stop Code) 1=Mr. |
| Please mail or fax this form to: Radiation Safety Branch Building 21, Room 116 RSB Use Only User RSB No. Training Class Assignment | 06=X-ray machines 13=Non-RSB contractors 3=Miss 07=PET imaging 15=RSB contractors 4=Dr. 08=X-ray diffractor & 16=Cyclotron 5=Ms. electron microscope | | |
| Radiation Safety Branch Building 21, Room 116 RSB Use Only User RSB No. Training Class Assignment | 16. E-mail Address | | |
| Radiation Safety Branch Building 21, Room 116 RSB Use Only User RSB No. Training Class Assignment | | | |
| Fax: 496-3544 | Radiation Safety Branch Building 21, Room 116 21 Wilson Drive, MSC 6780 | - II | |